



## Town of Westfield

425 East Broad Street, Westfield, New Jersey 07090

### Employment Application

#### Applicant Information:

Name (Last, First, Middle): \_\_\_\_\_

Address: \_\_\_\_\_ (Apt. if applicable) \_\_\_\_\_

City/Town/Zip: \_\_\_\_\_

Telephone: Home: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Position applied for: \_\_\_\_\_

Have you ever applied to the Town of Westfield before: \_\_\_\_ Yes \_\_\_\_ No If yes, give date \_\_\_\_\_

Date you can start: \_\_\_\_\_ Salary desired: \_\_\_\_\_

Are you available to work: \_\_\_\_ Full time \_\_\_\_ Part time \_\_\_\_ Temporary \_\_\_\_ Seasonal

Are you currently employed: \_\_\_\_ Yes \_\_\_\_ No May we contact you at work: \_\_\_\_ Yes \_\_\_\_ No

May we contact your current employer: \_\_\_\_ Yes \_\_\_\_ No

Are you currently on layoff status and subject to recall: \_\_\_\_ Yes \_\_\_\_ No

Do you possess a valid driver's license: \_\_\_\_ Yes \_\_\_\_ No

Do you possess a valid commercial driver's license: \_\_\_\_ Yes \_\_\_\_ No If yes, please list any  
endorsements: \_\_\_\_\_

If you are under eighteen years of age, can you provide proof of eligibility to work: \_\_\_\_ Yes \_\_\_\_ No

Are you legally eligible to work in the United States of America: \_\_\_\_ Yes \_\_\_\_ No (*Pursuant to  
Federal Law, proof of US Citizenship or immigration status will be required if you are hired.*)

Please be advised that any offer of employment may be subject to job-related medical, physical, drug, or  
psychological tests as well as complete background and criminal checks.

**The Town of Westfield is an Equal Opportunity Employer M/F**

**Employment History:** This section must be completed even if you attach a resume. List your last four employers and any major assignments within the same employer. Begin with the most recent. Include any military service. Explain any gaps in employment in the space on this form marked “comments” located on the bottom of this page.

Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___Yes ___No			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___Yes ___No			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
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May we contact for a reference: ___Yes ___No			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___Yes ___No			

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Education:** Provide information on your formal schooling and education. Include elementary, secondary, and post-secondary education, if any. Include any formal vocational or professional education.

School:	Years completed: (Circle)	Graduated: (Circle)	Major Field:
High:	1 2 3 4	Yes No	
College:	1 2 3 4	Yes No	
Other:	1 2 3 4	Yes No	

**Languages:** List any foreign languages you know and indicate your level of proficiency.

Language:	Speak Some:	Speak Fluently:	Read:	Write:

**Special Skills & Experience:** State any special skills, experience, training, licenses, certifications or other factors that make you especially qualified for the position for which you are applying.

**Comments & Additional Information:** Is there any additional information about you we should consider?

**References:** Provide the names, addresses and phone numbers of three people whom we may contact as a reference. They should not be relatives or former supervisors.

Name & Address:	Phone Number:	Years Known:

### Understandings and Agreements:

As an applicant for a position with the Town of Westfield, I understand and agree that I must provide truthful and accurate information in this application. I understand that my application may be rejected if any information is not complete, true and accurate. If hired, I understand that I may be separated from employment if the Town of Westfield later discovers that information on this form was incomplete, untrue, or inaccurate.

I give the Town of Westfield the right to investigate the information I have provided and talk with former employers (except where I have indicated they may not be contacted). I give the Town of Westfield the right to secure additional job-related information about me. I release the Town of Westfield and its representatives from all liability for seeking such information.

I understand that the Town of Westfield is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the Town of Westfield will make reasonable accommodations as required by the Americans with Disabilities Act. I understand that, if employed, I may resign at any time and that the Town of Westfield may terminate me at any time in accordance with its established policies and procedures. No representatives of the Town of Westfield may make any assurances to the contrary. I understand that any offer of employment may be subject to job-related medical, physical, drug, or psychological tests. I also understand that I may be subject to complete background and criminal checks.

*For your application to be considered, you must sign and date below.*

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_